



## RESEARCH ON “SAFER” CIGARETTES

For decades the tobacco industry have tried to quiet the health concerns of its customers by marketing products that claim to be better for their health.

- As early as the 1930s-40s, tobacco companies were running ads claiming that, due to special filters, their cigarettes had “lower tar and nicotine levels” benefiting the smoker’s health. Companies claimed that more doctors smoked their brand of cigarette; therefore they were better for one’s health.
- All tobacco companies began selling cigarettes advertised as “light” or “mild”. This strategy paid off regardless of the true health improvements. Tobacco companies were well aware that the implied claims were misleading or false.
- As more smokers began consuming these “light” brands, they were using new ways to smoke in order to compensate for lower nicotine levels. Consumers begin inhaling more deeply and blocking the filter vents that were to be “protecting” them from cigarette toxins. These practices not only nullified any health effects but created new health problems.
- Studies have shown that “low-tar” cigarettes have higher nitrate concentrations, producing higher levels of tobacco specific nitrosamines (TSNAs), the deadliest of carcinogens found in cigarette smoke.<sup>1</sup>
- Studies have reported that “low-tar” cigarettes have not reduced smokers’ overall risk of chronic obstructive pulmonary disease or lung cancer.<sup>2</sup>
- In the 1990s, tobacco companies began marketing “natural” cigarettes or those without additives, implying they did not have the same health consequences as regular cigarettes. The U.S. Federal Trade Commission took action and began requiring explicit

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<sup>1</sup> Wynder, EL and Muscat JE. The changing epidemiology of smoking and lung cancer histology. *Environmental Health Perspectives*, 103 (Supplement 8): 143-48.

<sup>2</sup> Djordjevic, MV. Nicotine regulates smoking patterns. *Preventive Medicine*, 26(4): 435-40.

statements that the product was “not a safer cigarette”, and that the product was still “dangerous to one’s health”.

- Another product, a “smoke-free” cigarette smoking system, has been marketed to those concerned about second hand smoke and smoke odor. Research has shown that smokers who used these products smoked four times the number of cigarettes to get the desired amount of nicotine<sup>3</sup>.

- Other cigarette alternatives using a redesigned filter, which has been marketed as “reducing carcinogenic compounds”, “producing less inflammation in the respiratory system” and “lowering secondhand smoke amounts”, have found glass fibers being discharged from the filter during use.<sup>4</sup>

- Tobacco processing technology that reduces the level of TSNAs, dangerous carcinogens in tobacco, has been used in a new way to cure tobacco. This lower TSNA-tobacco in combination with a charcoal-acetate filter is being test marketed in cigarettes. It is not been proven that reducing TSNA levels in tobacco leaf used in cigarettes lowers health risks associated with smoking. These types of cigarettes still contain a certain level of toxic substances. Although research indicates that activated charcoal filters can reduce the amounts of toxic gases in mainstream tobacco smoke<sup>5</sup>, there is currently no data linking the use of a charcoal filter with lowered cancer rates.

- In discussing all cigarette alternatives, it is difficult to objectively evaluate these new products, as there are no governmental regulations or legislative guidelines allowing for the independent testing of such products.

Adapted from the Campaign for Tobacco-Free Kids Fact Sheet “The Cigarette Companies and ‘Safer’ Cigarettes: A Long History of Exploiting Consumers’ Health Concerns to Keep Them Smoking”  
<http://tobaccofreekids.org/research/factsheets/pdf/0130.pdf>

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<sup>3</sup> Blackwell JR. Users of device may smoke more. Richmond Times Dispatch (August 17, 2000) [reporting on an upcoming study in Nicotine and Tobacco Research].

<sup>4</sup> Pauly LJ et al. Glass fiber contamination of cigarette filters: An additional health risk to the smoker? Cancer, Epidemiology, Biomarkers and Prevention 7(11): 967-79.

<sup>5</sup> Slade J and Henningfield J. Food and Drug Law Journal. Vol. 53 Supplement (998). Georgetown University Center for Drug Development Science.